

Tools to Evaluate Patient Education Materials

Written materials are the most accessible and least costly way to provide information in the clinical setting.

Patient literature must be evaluated to determine whether it is understandable for patients. A few tools are available to measure the readability of materials as well as the health literacy of the patients.

Evaluating the suitability of education materials for the audience^{1,2}

- Pretesting is the single most valuable tool to evaluate whether materials will be attractive and understandable enough to be used by the intended audience.
- *The Suitability Assessment of Materials*¹ and the *Medicaid Checklist*² assess how readable and understandable education materials are, and also evaluate how well materials stimulate learning and motivation and whether the materials are culturally appropriate.
- Many of the items on these two checklists can be used with any kind of education materials, whether written, audio, video, web-based, or interactive.

Example of Suitability Assessment Questions from Medicaid Checklist²

Writing Style

- Is the material written primarily in the active voice and in a conversational style?
- Is the reading level of the document appropriate for the intended audience?
- Are the words and sentences generally short, simple, and direct without being choppy or sacrificing cohesion and meaning?
- When you use technical terms, are they clearly explained with helpful examples?

Responses: Yes, Needs improvement, Not sure or Not applicable, plus Comments.

Testing the readability of the education materials

Readability formulas measure only one aspect of readability, but they are a place to start, providing scores that can be converted to general grade levels:³

- *Easy-to-read:* Fifth- to sixth-grade reading level. This level can reach the majority of those who need the information and is recommended for all health education materials.
- *Average reading:* Eighth grade. *USA Today* is written at the eighth-grade level.
- *Difficult-to-read:* For most of the population, this is anything above eighth-grade level, especially when it includes medical jargon and more information than needed.

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Formulas to measure readability provide a good general estimate. The formulas used most widely for medical documents and patient education materials are:^{1,4}

- The *Flesch-Kincaid Grade Level* and *Flesch Reading Ease Score* count the number of syllables per word and words per sentence. The Reading Ease Score takes other readability measures into account as well. Word for Windows can calculate these as part of its spelling and grammar function.
- The *SMOG (Simple Measure of Gobbledygook) Index* is based on average sentence length and number of words with three or more syllables in a total of 30 sentences.

Testing the health literacy of those who need the information

Two measures of health literacy have been validated — the REALM and the TOFHLA.

- The *REALM: The Rapid Estimate of Adult Literacy in Medicine* is a one-to-two-minute test that measures a patient's ability to recognize and pronounce common health and medical terms.⁵
- The *TOFHLA: The Test of Functional Health Literacy in Adults* uses hospital materials to test reading comprehension and numerical skills. It takes 20-25 minutes to administer. It is available in Spanish and English.^{6,7}
- These tests are most often used in research but the REALM and the S-TOFHLA, a 10-15 minute version of the TOFHLA, also can be useful in the primary care setting to evaluate individual patients.⁸

References

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